## <u>City of Bloomington</u> Parking Citation Appeal Form -- Office of the City Clerk

- Appeals must be submitted within seven (7) days from date of issue.
- \* The registered owner of the vehicle is ultimately responsible for the citation(s).
- Being unaware of the City's parking signs and regulations is not grounds for an automatic dismissal of citation(s).
- When applicable, parking permits must be displayed according to the program's regulations to be considered valid.
- The appeal process is reserved for citations that are written in error. Understanding parking regulations is considered to be the responsibility of a motorized vehicle driver.

## PLEASE COMPLETE ENTIRELY AND LEGIBLY:

Were you the driver who received the cit	ration? Yes  No	If no, alert the assistant.
Name of the registered owner of the car:		
Driver's Information:		
Name:	Telephone:	
Address:		
City/State/Zip:		
E-mail:		
Citation #:		
License plate #:		
Date of citation:		
Rationale for appeal:		
		400 m 100 dags
I hereby affirm that all statements made by me are true and accurate segrounds for cancellation of this appeal.		
Signature		Date
	OFFICE USE	
Intake • Put on Appeal		• Decision
Enter decision into T-2		• File